



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. **E425278**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION ☐

CASE #	<b>15-01238</b>
LOCAL AGENCY CODING	
TOTAL # OF UNITS	<b>02</b>
OBJECT STRUCK	

DATE OF COLLISION	<b>05</b>	<b>17</b>	<b>2015</b>	TIME (2400)	<b>0756</b>	COUNTY #	<b>31</b>	MILES	<b>N</b>	<b>E</b>	<b>IN</b>	<b>OF</b>	<b>0664</b>
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ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒

**VERNON RD** BLOCK NO. ☒ **11200**

DISTANCE **400** **00** MILES ☒ N ☐ E ☒ **18TH ST NE**

UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☐ NO ☒ PHONE **D: 4253093925**

LAST NAME **JOHNSON** FIRST NAME **FELICIA** MIDDLE INITIAL **L**

STREET NEW ADDRESS **2324 75TH AVE NE**

CITY **LAKE STEVENS** ST **WA** ZIP **982583175**

CDL ☐ RESTRICTIONS ☐ ENDORSEMENTS ☐

DRIVER'S LICENSE # **JOHNSFL195BK** STATE **WA** SEX **F** D.O.B. **01** **12** **1981**

ON DUTY ☐ STATUS ☐ AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **AMT3499** STATE **WA** VIN# **3FA8P0HR1DR350953**

TRAILER PLATE # ☐ STATE ☐ TRAILER PLATE # ☐ STATE ☐

VEH. YEAR **2013** MAKE **FORD** MODEL **FUSION** STYLE ☐ VEHICLE TOWED YES ☐ NO ☒ TOWED BY ☐ GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **JEREMIAH JOHNSON 2324 75TH AVE NE LAKE STEVENS WA 98258**

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **GEICO 4358-96-71-74**

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # ☐ CHARGE ☐



UNIT 02 MOTOR VEHICLE ☐ PEDAL-CYCLE ☐ PEDESTRIAN ☒ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE

LAST NAME **SMITH** FIRST NAME **DALRENE** MIDDLE INITIAL **L**

STREET NEW ADDRESS **2008 GRAND AVE #302**

CITY **EVERETT** ST **WA** ZIP **98201**

CDL ☐ RESTRICTIONS ☐ ENDORSEMENTS ☐

DRIVER'S LICENSE # **SMITHDL504PE** STATE **WA** SEX **F** D.O.B. **10** **05** **1950**

ON DUTY ☐ STATUS **3** AIRBAG ☐ RESTR. ☐ EJECT ☐ HELMET USE **2** INJURY CLASS **6** NATURE OF INJURIES **ELBOW, SHOULDER**

LICENSE PLATE # ☐ STATE ☐ VIN# ☐

TRAILER PLATE # ☐ STATE ☐ TRAILER PLATE # ☐ STATE ☐

VEH. YEAR ☐ MAKE ☐ MODEL ☐ STYLE ☐ VEHICLE TOWED YES ☐ NO ☐ TOWED BY ☐ GOVT. VEHICLE YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # ☐

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # ☐ CHARGE ☐



OFFICER'S NAME (PRINT) **M. HINGTEN** BADGE OR ID # **126** AGENCY **WA0311900**



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E425278**

CASE # **15-01238**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES				
NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES				
NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES				

NARRATIVE

Veh #1 was traveling west in approximately the 11200 blk of Vernon Rd. This section of roadway has housing to the south and a sidewalk to the north. Ped #1 was running on the sidewalk, northbound, with traffic. Veh #1 was on the far right side of the proper lane of travel. Because of Veh #1 being to the right side, Veh #1's passenger side mirror was over the sidewalk. As Veh #1 approached Ped #1 on the sidewalk, the passenger side mirror impacted the left elbow area on Ped #1. The driver of Veh #1 immediately stopped and Ped #1 sat down.

Veh #1 driver stated that she had just worked a long shift and believed that she may have dozed off. Veh #1 driver stated that she believed she was traveling at 30 mph.

Ped #1 was treated by aid onscene and later transported to Providence Medical Center. Aid personnel stated that they did not believe there was any significant injury but there were injuries to her elbow and shoulder.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

**M. HINGTGEN**

**05-17-15 06:07 PM**

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

DATE

**SGT. C. VALVICK 71**

**5/18/2015 12:26:39 AM**

BADGE OR ID #

**126**

ORI #

**WA0311900**

TIME POLICE DISPATCHED

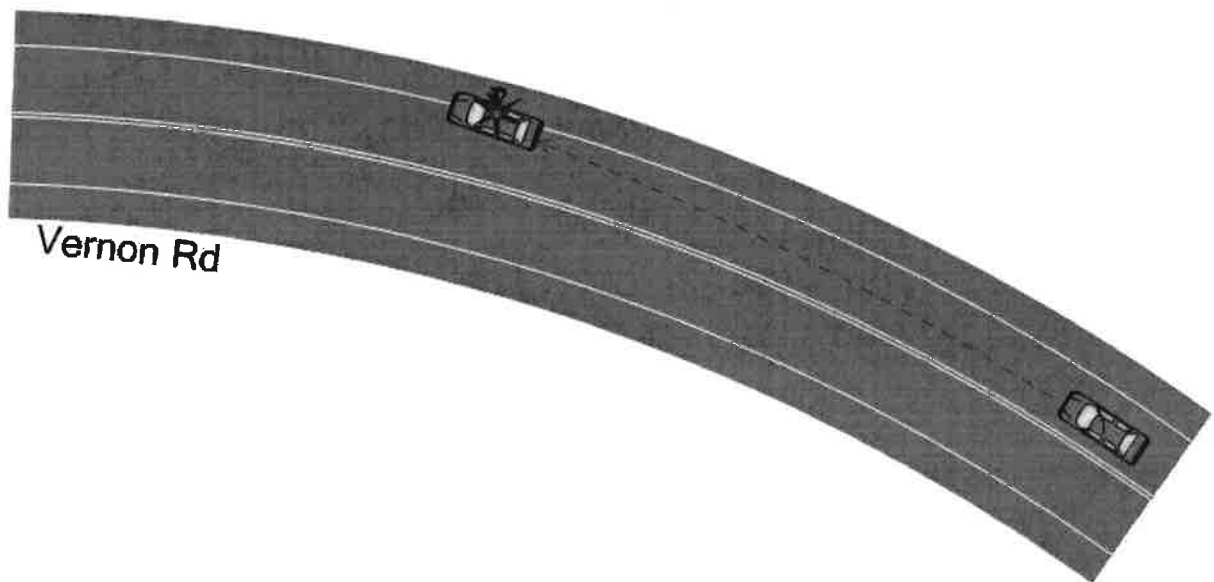
**7:56 AM**

TIME POLICE ARRIVED

**7:59 AM**



\*Not to Scale\*



# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

15-012

### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Johnson, Felicia, Ladene	RACE W	ETH	SEX F	DOB 1-12-81	AGE 34	HGT 5'8"	WGT 250	HAIR Brown	EYES Brown
STREET ADDRESS 2324 75th Ave NE		CITY Lake Stevens		STATE WA		ZIP 98258		RES. STATUS		
HOME PHONE		CELL PHONE 425-309-3925		PLACE OF EMPLOYMENT Labor ready						
WORK PHONE		EMAIL ADDRESS rubytodiamond@outlook.com								

I, \_\_\_\_\_, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY : (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was driving down the road coming back from dropping a friend off after working a late night shift and in a split second I closed my eyes and I suddenly drifted over to the right and I knicked a womens elbow with my car mirror.

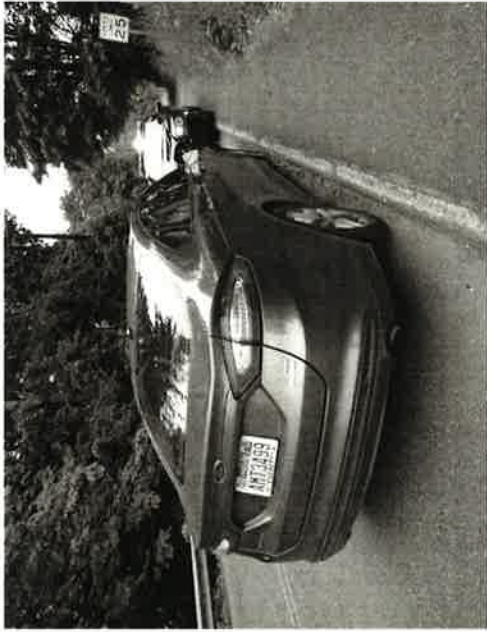
I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: Felicia Johnson	DATE SIGNED 5-17-15	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER: 128	DATE SIGNED 5/17/15	LOCATION SIGNED USPD

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

ORIGINAL



ORIGINAL



Case # 15-01238

LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number M. HINGTGEN #126		Case Number 15-01238			
Type of Crime: Felony / Misdemeanor (Circle)		Type of Case: COLLISION		Date/Time: 5/17/15 @0750			
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evi will be held until court dispo or when the Statute of Limitations has expired *Found and Sfkg will be held for 60 days or 60 days past owner notification					
Item # 1  Action # 3	Item Photo CD		Brand Name		Storage Location		
	Brand/Model/Caliber (Further Description)						
	Serial #	Where Found	Weight of Narcotic				
	Disposition						
Owner's Name		Address	City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions							
Item #  Action #	Item		Brand Name		Storage Location	Disposition	
	Brand/Model/Caliber (Further Description)						
	Serial #	Where Found	Weight of Narcotic				
	Disposition						
Owner's Name		Address	City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions							
Item #  Action #	Item		Brand Name		Storage Location	Disposition	
	Brand/Model/Caliber (Further Description)						
	Serial #	Where Found	Weight of Narcotic				
	Disposition						
Owner's Name		Address	City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions							
Item #  Action #	Item		Brand Name		Storage Location	Disposition	
	Brand/Model/Caliber (Further Description)						
	Serial #	Where Found	Weight of Narcotic				
	Disposition						
Owner's Name		Address	City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions							
Item #  Action #	Item		Brand Name		Storage Location	Disposition	
	Brand/Model/Caliber (Further Description)						
	Serial #	Where Found	Weight of Narcotic				
	Disposition						
Owner's Name		Address	City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions							
Evidence Control Use Only:							
Received by Evidence:		NCIC/WACIC	✓	Date:	CAD/RMS Checked	ROUTING: _____	
Name: _____ # _____		NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room		
Date: _____ Time: _____		NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File		

Closed	05/17/15	08:29:43
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Loc: 11201 VERNON RD , LKS btwn 18 ST NE & N LAKESHORE DR (V)

Name: \_\_\_\_\_ Addr: \_\_\_\_\_ Phone: \_\_\_\_\_

/0756	(SP0251)	ENTRY		, VEH VS PED
/0756		CROSS		#AG15001380
/0756	(SP0320)	DISPER	19D2	#SS126 HINGTGEN, OFFICER (MICHAEL)
/0757		ASSTER	19D3	[11201 VERNON RD ,LKS]
				#SS133 HEINEMANN, OFFICER (GAVIN)
/0759		ONSCNE	19D2	
/0801		ONSCNE	19D3	
/0803		ASNCAS	19D2	\$SS15001238
/0805	(*****)	REMINQ	19D2	AMT3499
/0805	(SP0320)	REMINQ	19D2	LIC, 19D2, AMT3499, ,,
/0812	(SP0174)	CHGLOC	19D3	[SAFEWAY]
/0817	(SP0320)	TRANSC	19D3	[COUNTY JAIL]
				, 62
/0817		CLEAR	19D3	
/0817	(SS126 )	REMINQ	19D2	MDTWANT, SMITH, DALRENE, L, 100550, , , WA, , , , , , , , , , ,
/0829	(SP0320)	CLEAR	19D2	, D/H
/0829		CLOSE	19D2	

**LSPD  
ORIGINAL**